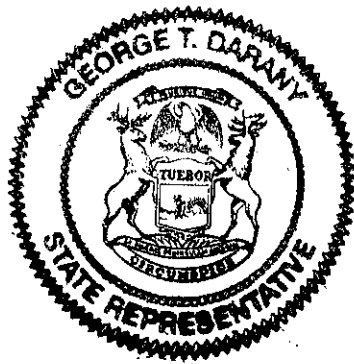


YourArmy



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Tens of thousands of soldiers may soon receive Purple Heart awards for traumatic brain injuries if proposed new policy guidelines are approved as expected.

The guidelines would apply to those who suffered such head wounds in the wars in Iraq and Afghanistan.

Since 2001, many troops have not been awarded the Purple Heart, which recognizes U.S. troops killed or wounded in enemy action, for sustaining such concussions or "invisible" wounds.

Vice Chief of Staff Gen. Peter Chiarelli, who is leading the Army's initiative, said that concussions and other traumatic brain injuries often have serious, long-term effects, and it's not fair to disqualify troops who suffer them simply because the wounds are not visible.



Chiarelli

He also points out that current Purple Heart criteria allow the award for such injuries, and his proposed policy guidelines do not change the regulation itself.

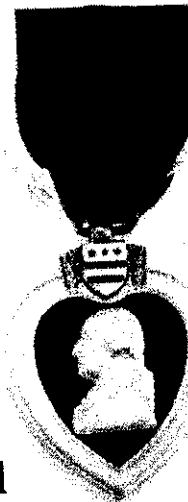
"We haven't changed anything," he said. "We're not changing the definition of concussion."

What he wants to do is "clarify for everyone" how to apply the existing regulation.

Army Regulation 600-8-22 lists five examples of "enemy-related injuries that clearly justify award of the Purple Heart." No. 5 reads: "Concussion injuries caused as a result of enemy-generated explosions."

Purple Heart for TBIs

Policy change should
make more soldiers eligible



"The regulation specifically says 'if you have a concussion,'" Chiarelli said. "It doesn't say if you have a concussion with blood coming out of your ears, if you lose your eyesight ... pop an eardrum. It says if you have a concussion."

The Army has awarded 25,698 Purple Hearts since 2001.

Chiarelli believes some soldiers were shortchanged. He encourages them — back to 2001 — to reapply. Since 2000, soldiers diagnosed with TBI number more than 114,000, a figure that includes nonwar zone injuries. Of those, 86,000 cases were classified as mild.

According to the Armed Forces Health Surveillance Center, moderate TBI is characterized by:

- A confused or disoriented state that lasts less than 24 hours
- Loss of consciousness for up to 30 minutes
- Memory loss lasting less than 24 hours
- Structural brain imaging,

TRAUMATIC BRAIN INJURY

According to the Defense Department, there were 114,958 cases of TBI between 2000 to 2010.

Active	Severity
Penetrating	1,664
Severe	946
Moderate	13,758
Mild	65,523
Not classifiable	5,523
Total	87,414

such as MRI or CT scan, yielding normal results.

"Sometimes the treatment for a concussion is to rest and take Tylenol for two weeks," Chiarelli said. "Rest is what allows the brain to heal. I don't see that as any different than someone who has a bullet wound. You bandage it up and time heals the wound."

Chiarelli has been known to carry a photo that shows a CT scan of a person who suffered a concussion. Compared with a healthy brain scan that sits beside it, the effects are obvious.

But soldiers — and medics and

doctors — don't often get an inside look at their buddies' brains.

The Army has been working with the other services and the National Football League to develop a better understanding of the effects of mild traumatic brain injury.

Officials from all four services were scheduled to meet in mid-March with Clifford Stanley, undersecretary of defense for personnel and readiness, to discuss the recommended changes.

As part of the Marine Corps review of Purple Heart criteria, Commandant Gen. Jim Amos ordered a review of new research

indicating serious brain injuries often occur even in cases in which the individual is not rendered unconscious.

Marine officials would not discuss details of their proposal, but Chiarelli said the Corps' proposal is similar to the Army's.

As part of the proposed new guidelines, the Army has created a 10-point checklist for medical professionals who would use it to determine Purple Heart eligibility.

Head-wound patients would be evaluated for specific symptoms and responses to treatment. Included in that list is an initial

AWARDS BY THE NUMBERS

Here are the numbers of medals the Army has awarded to soldiers for operations Enduring Freedom and Iraqi Freedom. The totals represent awards given from Dec. 15, 2001, through Jan. 31, 2011, for OEF, from March 15, 2003, to Aug. 30, 2010, for OIF, and from Sept. 1, 2010, to Jan. 31, 2011, for Operation New Dawn.



Awards	OEF	OIF	OND*
Medal of Honor	3	2	0
Distinguished Service Cross	5	15	0
Silver Star	199	408	0
Legion of Merit	40	122	2
Distinguished Flying Cross	128	116	0
Soldier's Medal	33	111	0
Bronze Star Medal for Valor	1,445	2,453	15
Bronze Star Medal svc/ach	29,022	99,802	1,319
Purple Heart	4,319	21,323	58
Meritorious Service Medal	8,194	23,416	810
Air Medal for Valor	863	724	0
Air Medal svc/ach	8,472	18,321	578
ARCOM for valor	2,528	5,062	1
ARCOM svc/ach	62,476	349,900	5,714
Army Achievement Medal	12,418	49,902	1,815
Combat Infantryman Badge	22,045	41,596	333
Combat Medical Badge	3,051	12,377	62
Combat Action Badge	23,389	68,337	1,034
Grand Total	178,628	693,987	11,739

Total for all operations

684,354

*Operation New Dawn

SOURCE: AWARDS BRANCH, ARMY HUMAN RESOURCES COMMAND

STAFF

CONCUSSION CHECKLIST

Here is the Army's proposed checklist to help determine if a soldier has suffered a concussion and whether he received "medical officer treatment." Positive answers in both of these categories are required for approval of a Purple Heart.

- If at least one of these signs or symptoms was present immediately after the event, the soldier suffered a concussion:
 - Diagnosis of concussion or traumatic brain injury.
 - Loss of consciousness or decreased level of consciousness.
 - Loss of memory of events right before or after the injury.
 - Neurological deficits such as weakness, loss of balance, change in vision,

difficulty coordinating movement, headaches, nausea, difficulty understanding or expressing words, sensitivity to light.

- Intracranial lesion identified on CT or MRI scan.
- If any of these treatments occurred, the soldier received medical officer treatment:
 - Limitation of duty after the incident.
 - Pain medication such as acetaminophen, aspirin,

Ibuprofen, etc., to treat symptoms associated with the injury such as headache.

- Referral to neurologist or neuropsychologist to address problems associated with injury.
- Rehabilitation such as occupational therapy, physical therapy, etc., for problems associated with injury.
- Medical officer certification if treatment is given by other medical professionals.

Note: Treatment is described as "any action, procedure, restriction or medication directed by a physician as a component of a deliberate plan to address a specific medical condition or injury."

screening of signs and symptoms present after an explosion or other event causing the brain injury, such as loss or decreased level of consciousness, loss of memory. Other symptoms include weakness, loss of balance, nausea or signs of injury on a MRI or CT scan. The soldier must later have been placed on limited duty or given pain medication, referred to a neurologist, sent to rehabilitation or otherwise treated by a medical professional.

To test his theory that soldiers are being wrongfully denied, Chairelli last fall asked the Army Human Resources Command to randomly pull nine files: three in which the soldiers received Purple Hearts for concussions; three which were closely considered but then denied, and three that were denied outright.

It reviewed the files and found that four of the six denied should have received Purple Hearts under the proposed guidelines. That exercise led to the wholesale review of the policy.

Signature wound

The number of TBI cases rose each year in the wars in Iraq and Afghanistan with the proliferation of improvised explosives as the weapon of choice among insurgents. Nearly 31,000 U.S. troops suffered

a brain injury last year alone.

Along with post-traumatic stress disorder, TBI has been called a signature wound of the wars in Afghanistan and Iraq. It can cause mood swings, memory loss, depression and paranoia, among other symptoms. Initial detection, however, is often difficult — especially in instances where troops don't lose consciousness. At first, traumatic brain injury can appear to be symptom-free.

Amos and Chairelli have called for better war-zone standards to identify TBI cases as soon as they occur with hopes of reducing the chances they'll lead to long-term problems.

Since last summer, the military has required 24-hour rest for any personnel suffering even a mild concussion. After a second head injury, sufferers are required to spend seven days with no physical activity. A third head injury requires evaluation by a neurologist in theater.

A fresh look

The Purple Heart traces back to Gen. George Washington and the Continental Army. However, after the revolution, it was not awarded for another 100 years. More than 40,000 have been awarded to U.S. troops since the invasion of

WHAT MERITS THE MEDAL

Here are examples of injuries that justify award of the Purple Heart, according to the Army regulation:

- Injury caused by enemy bullet, shrapnel or other projectile created by enemy action.
- Injury caused by enemy-placed mine or trap.
- Injury caused by enemy-released chemical, biological or nuclear agent.
- Injury caused by vehicle or aircraft accident resulting from enemy fire.
- Concussion injuries caused as a result of enemy-generated explosions.

Injuries or wounds that do not qualify for the Purple Heart, according to the Army regulation:

- Frostbite or trench foot injuries.
- Heatstroke.
- Food poisoning not caused by enemy agents.
- Chemical, biological or nuclear agents not released by the enemy.
- Battle fatigue.
- Disease not directly caused by enemy agents.
- Accidents, to include explosive, aircraft, vehicular and other accidental wounding not related to or caused by enemy action.
- Self-inflicted wounds, except when in the heat of battle, and not involving gross negligence.
- Post-traumatic stress disorders.
- Jump injuries not caused by enemy action.

SOURCE: ARMY REGULATION 600-8-22

Afghanistan, according to records maintained by the Military Order of the Purple Heart, an organization of 45,000 medal recipients.

Collectively, it backs the effort to take a fresh look at the policy for mild TBI, said retired Army Col. John Bircher, a spokesman for the group, who received a Purple Heart for taking rocket shrapnel while serving with Special Forces 42 years ago in Vietnam.

"The nature of conflict is constantly changing," he said, "... so the criteria should be adapted to the times. There is usually internal bleeding from a serious concussion — you know, brain bleeding — and the core criteria is whether or not you spill blood."

Current Purple Heart criteria list 10 examples of wounds that do not qualify. Among them are "battle fatigue" and post-traumatic stress disorders. Battle fatigue was the early term for what today is recognized as some form of PTSD.

If and when the new guidance is approved and issued, the folks at HRC are expecting a flood of requests from former soldiers who suffered concussions, asking for their cases to be reviewed. In less than a week since Military Times broke news of the review March 16, HRC officials received more than 100 phone calls asking for

more information. Active-duty soldiers will request reviews through their chain of command.

Readers responded almost immediately when news of the new policy appeared on armytimes.com.

"Service members who received a concussion that cause not only immediate problems but long-term problems should rate the recognition of the Purple Heart," Lt. Col. Kenneth Martin, at Fort Leavenworth, Kan., wrote in an e-mail. "In some cases this injury is hidden and causes changes in the individual. We need to try and get this awarded to all service members who have a combat-related concussion retroactively."

HRC officials say that within the next few weeks, they will issue guidance on how soldiers — active and veterans — who suffered brain injuries can ask that their files be reviewed for a possible Purple Heart award.

HRC requests that soldiers not begin a review request until the guidelines are issued.

HRC officials won't predict how many new requests are likely to be made but say they will review every one.

Only those from veterans will go directly to HRC. Active-duty soldiers will submit their packets through their chain of command. □

HOW TO APPLY

Soldiers and veterans who have been denied a Purple Heart for concussion injuries may apply for reconsideration of the award. How to do that:

- Soldiers in the Active Army, Army Reserve or Army National Guard should apply through their company commander or equivalent.
- Veterans should apply to the U.S. Army Human Resources Command at: Commander, USA HRC ATTN: Awards & Decorations Branch (AHRC-PDP-A) 1600 Spearhead Division Ave. Fort Knox, KY 40121-5408 1-888-276-9472 E-mail: hrcawards.lgdp@conus.army.mil Website: <https://www.hrc.army.mil/awards>

Soldiers and veterans should include:

- DA Form 4187 (personnel action). The form can be downloaded at <http://armypubs.army.mil/velorms/pdf/A4187.PDF>.

For soldiers on active, Guard or Reserve duty, the form must be signed by the chain of command through the first general officer in the soldier's current chain of command. Veterans do not need additional signatures.

■ Deployment orders. Soldiers can obtain them from their Military Personnel Office. Veterans can get them from the Veteran's Inquiry Branch by e-mailing veterans@conus.army.mil.

For more information, see <https://www.hrc.army.mil/site/Reserve/Soldierservices/veteran/overview.htm>.

■ Officer Record Brief or Enlisted Record Brief/DA Form 2-1. Soldiers can get them from the Military Personnel Office. Veterans should see the Veteran's Inquiry Branch at veterans@conus.army.mil.

■ One-page narrative describing how the soldier was wounded.

■ Two eyewitness statements or other official documentation to back up the narrative.

■ Casualty report.

■ SF 600 (Chronological record of medical care) from the soldier's medical records.

■ DD Form 214 certificate of release/discharge from active duty, if applicable.

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